OMB Approval No. 2900-0379 Respondent Burden: 5 minutes

Departm	ent of Vetera	ns Affairs	TI	ME R	ECORD (W	ORK-S	TUI	DY PROGR	AM)			
1. AGREEMENT C					3. FILE NUMBER (If Ch. 35, include prefix)							
ΛΔ	APPROVED PE	RIOD OF EMI		NT (Mo	nth day year)		5. TO	TAL NO. OF HOUR	S TO BE V	WORKED		
A. FROM	WITHOULD IL	ERIOD OF EMI	B. TO	.141 (1010)	min, day, year)							
INSTRUCTIO 6A. PLACE OF EM	NS: Use Item	8, Remarks, on r	everse to	show cha	anges in Items 6A	and 6B. Inc	clude E OF S	effective dates.				
6C. MAILING ADDRESS OF SUPERVISOR							6D. TELEPHONE NO. OF SUPERVISOR (Include Area Code)					
							()				
	NO OF		1	OULE OF TALS	HOURS WORK		05	OLDALII ATIVE	INIT	TALS		
DATE	NO. OF HOURS	CUMULATIVE TO DATE	STUDENT		DATE	NO. HOU	RS RS	CUMULATIVE TO DATE	STUDENT			
						1						
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DATE	NO OF	7. SCHEDULE OF HOUR CUMULATIVE INITIALS				NO OF	CLIMI II ATIVE	INITI	ALS
	NO. OF HOURS	CUMULATIVE TO DATE	STUDENT	SUPV.	DATE	NO. OF HOURS	CUMULATIVE TO DATE	STUDENT	
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PRIVACY ACT INFORMATION: No monies or benefits can be paid unless this report is completed and filed as required by existing law and regulations (38 U.S.C. 3485). The information on this form will be used to determine proper amount payable. The responses you submit are considered confidential (38 U.S.C. 5701). They may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22, Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine monies payable under the law.

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.